SBRS Reference Guide

Submitting A School Based Rehabilitation Services Referral Form

This reference guide is designed to support accurate and complete SBRS referral submissions. It highlights key areas to review, explains why each step is important, and provides practical reminders to help connect students to the correct services as efficiently as possible.

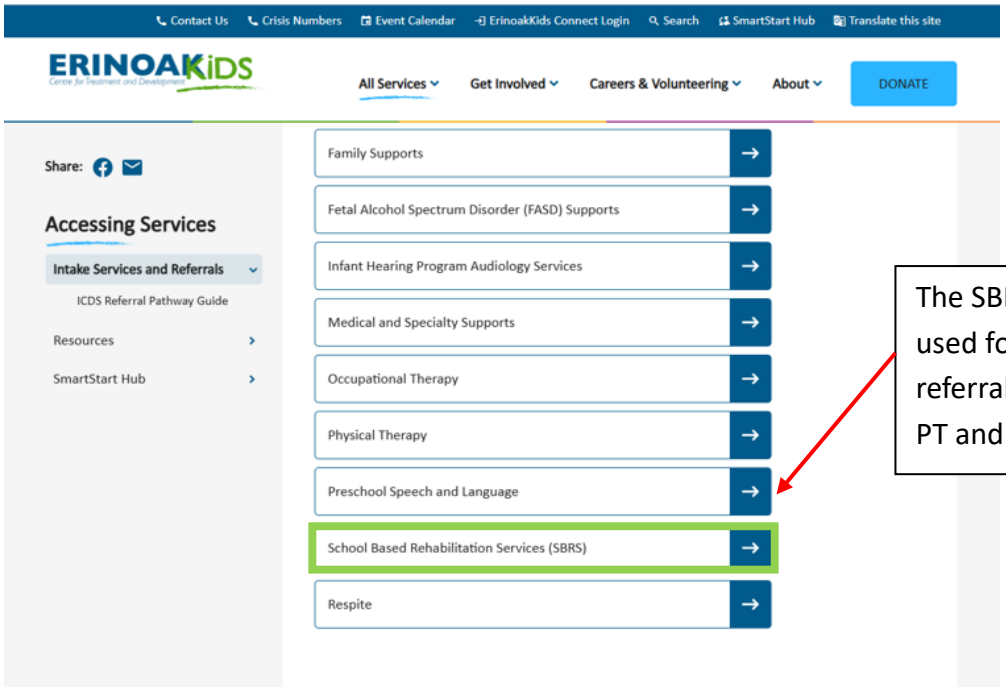
Accessing the SBRS Referral Form

Why this is important:

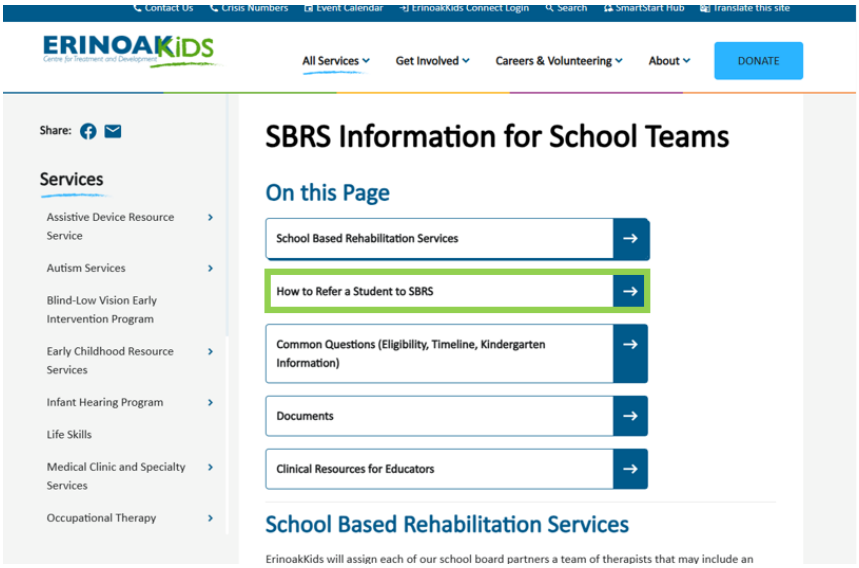
SBRS referral forms require a referral code and will prompt users to enter the appropriate school district referral code before the form can be accessed. If a password prompt does not appear, the General Referral Form may have been selected instead. SBRS Referral Forms are used to submit SBRS OT, SBRS PT, and SBRS SLP referrals. The General Referral Form is intended for In-Centre Treatment referrals only and should not be used for SBRS referrals. Selecting the correct referral reduces the need for follow-up and allows school referrals to be processed efficiently.

Steps to follow:

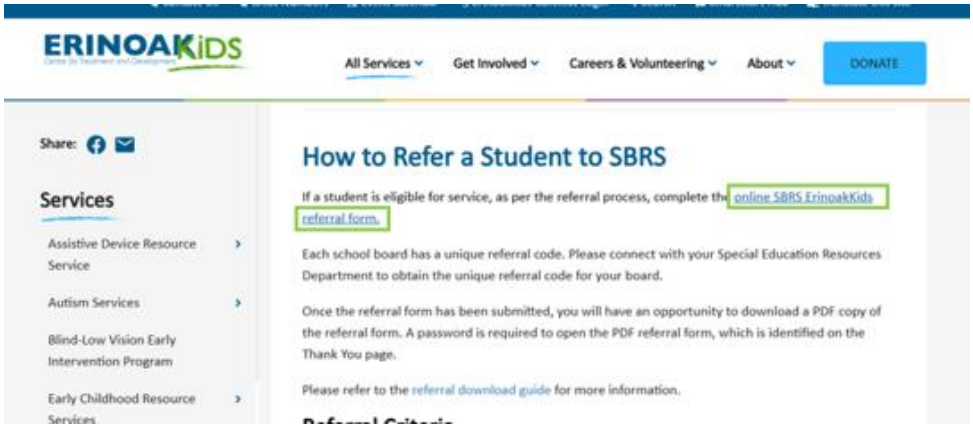
- From the erinoakkids.ca, click “All Service”
- Select Intake Services and Referrals
- Scroll down to the Quick Links section
- Click School-Based Rehabilitation Services (SBRS)



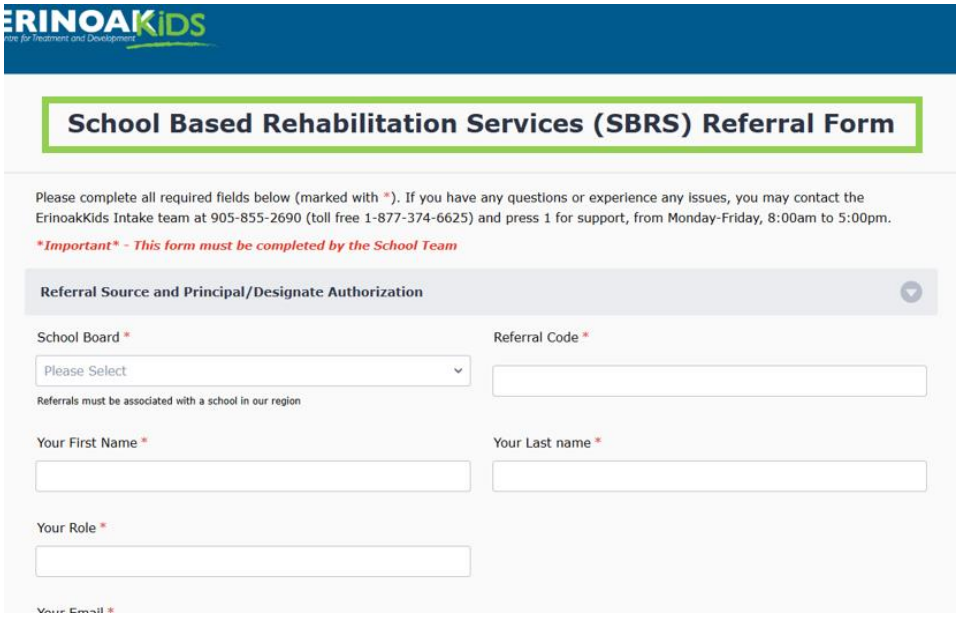
- Select “How to Refer a Student to SBRS”



- Click the hyperlink for the Online SBRS ErinoakKids Referral Form
- Once the form opens, verify that the title at the top of the page is School-Based Rehabilitation Services Referral Form (displayed in bold)
- Complete the referral form, ensuring all required information is entered
- Ensure the school district's referral code is entered when submitting an SBRS referral form



Completing the SBRS Referral Form:



Referral Code:

All school referrals require a referral code to submit the referral.

Tips:

- Refer to the SBRS postcard included in the communication package at the beginning of the school year to confirm the correct SBRS referral code.
- Connect with a SBRS clinician or clinical services supervisor assigned to your school to confirm the code if uncertain.

Entering School and Student/Family Information:

- **Ensure referral information is complete, current, and entered in the correct sections**
  - Address details, including unit numbers and complete street information
  - Date of birth, entered in the correct order: **Day / Month / Year**. The calendar feature on the referral form can be used as a helpful reference.
  - Appropriate email addresses for the Person to Notify and Next of Kin
  - Current and accurate phone numbers
  - Correct relationship information for each listed contact
- **Ensure school staff information is entered only in the appropriate school/referral source sections, rather than in the student or family contact sections**

Tip: Browser autofill, saved cache, and cookies may occasionally populate fields with information from a previous submission. Consider clearing your browser cache and cookies before starting a new referral.

Why Clear Your Browser Cache and Cookies Before Completing a Referral Form?

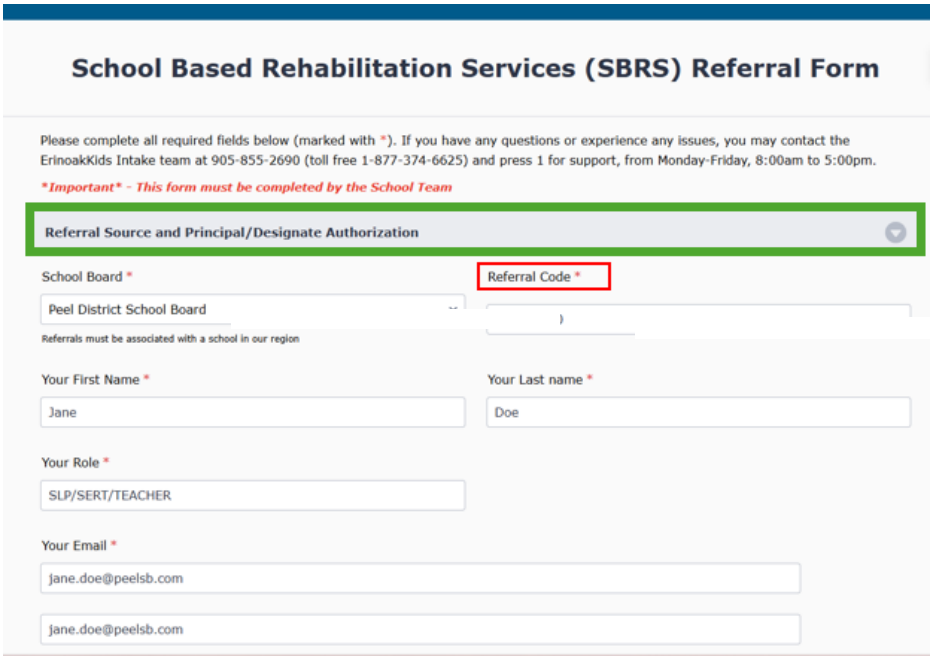
To help ensure referral forms are completed accurately, **users are encouraged to clear their browser cache and cookies before starting a new submission**. Browsers can store previously entered information and may automatically populate fields based on past activity. While this feature can save time, it may also insert outdated information into a referral form. Clearing cache and cookies can help reduce unwanted auto-fill entries, support accurate data entry, and prevent processing delays.

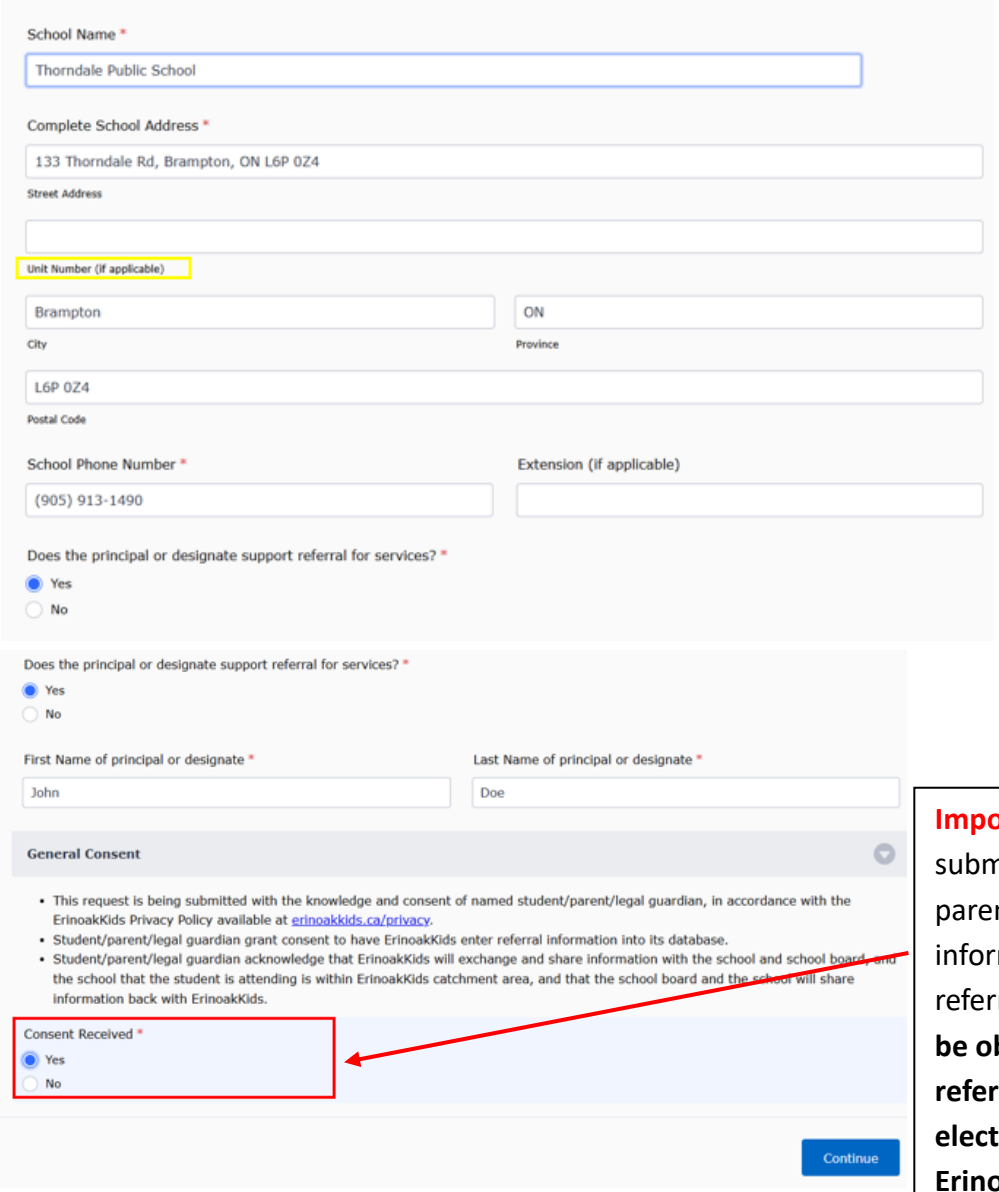
Review of Referral Sections:

Section 1: Referral Source and Principal/Designate Authorization (*School Information*)

The first section of the referral form is used to collect **school information** and the details of the individual submitting the referral (e.g., SLP, SERT, classroom teacher, or other school staff). Please ensure the following information is entered accurately:

1. Enter your school board and school district's SBRS referral code
2. Provide your full name and email address
3. Enter the school's full address, including postal code
4. Provide the school's main contact information, including phone number
5. Complete all required fields related to the referral source and school





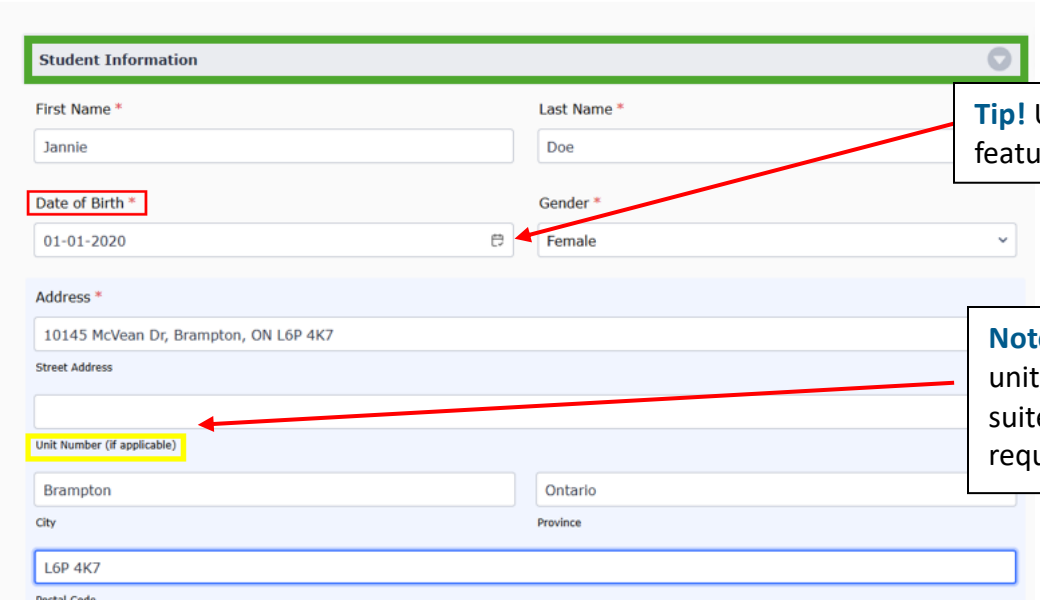
Important! Before submitting the referral, parents/guardians **must** be informed about the referral, and **consent must be obtained before the referral form is electronically submitted to ErinoakKids**

Section 2: Student Information

In the Student Information section, ensure all information is accurate and up to date before submitting the referral. If browser cookies/cache were not cleared before beginning, some sections may auto-fill with another students information or school information – Please review before submitting to ensure the correct student information is included in this section.

1. Enter the student's legal first and last name exactly as recorded in school records
2. Enter student's Date of Birth (DOB) in the following format:
    - **Day / Month / Year** (Ensure DOB entered on referral matches school records)
3. Enter the student's full home address, ensuring all details are accurate and current

Important! Accurate student information helps ensure the referral is processed efficiently, reduces delays, and supports the creation of a correct client profile within ErinoakKids.

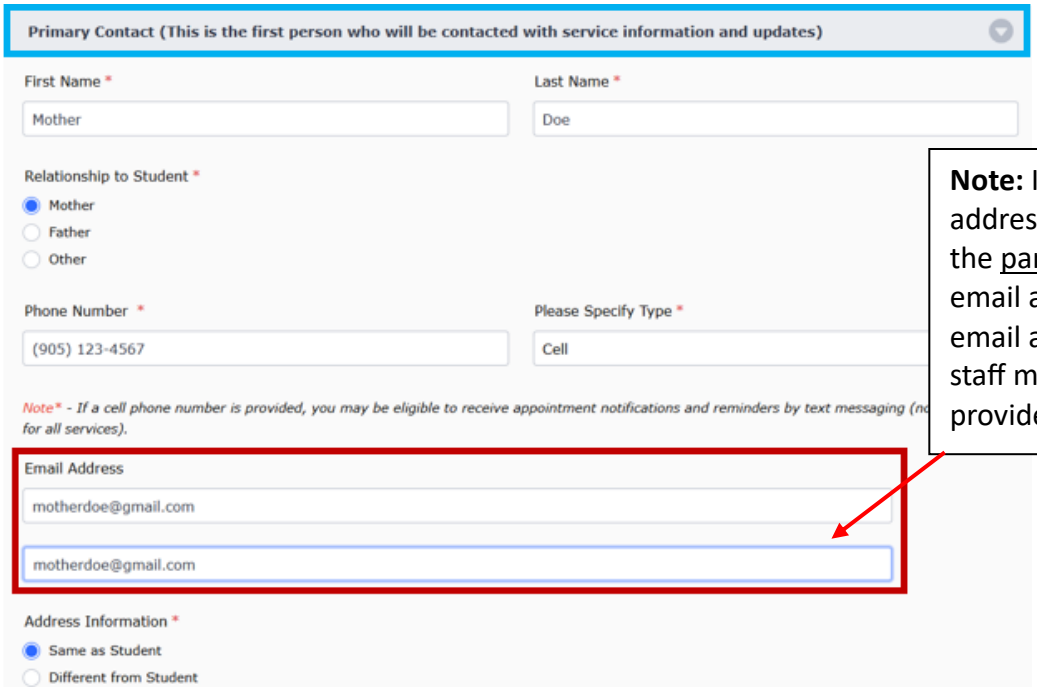


Section 3: Primary and Secondary Contact Information

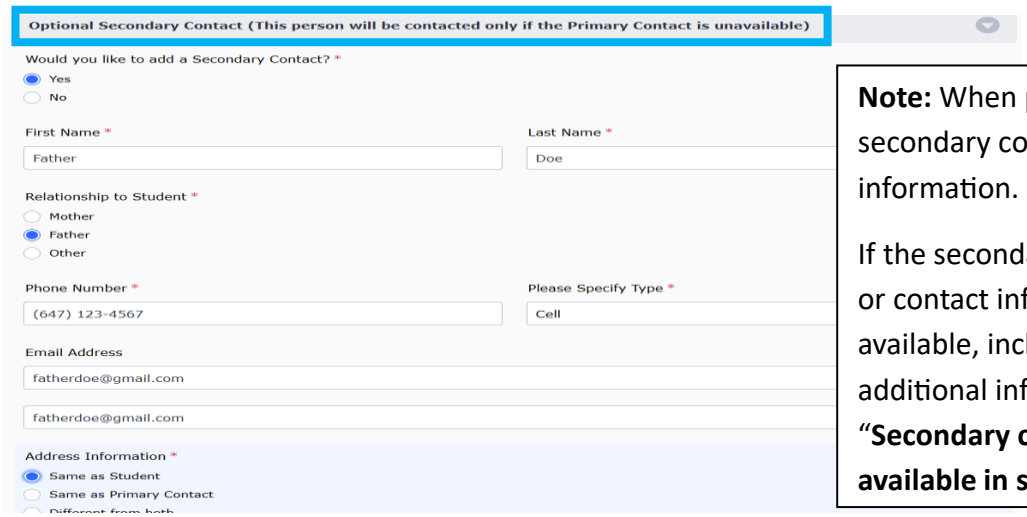
Please ensure that all Primary Contact information is accurate and up to date before submitting the referral.

1. Enter the legal first and last name of the parent/guardian, ensuring it matches the information on the student's school record
2. Verify that all phone numbers and email addresses are current and accurate
3. Ensure that the home address is complete and up to date
4. Complete the Secondary Contact information, if applicable and verify that all contact details are accurate

Important! ErinoakKids uses the contact information provided on the referral as the primary source for communication with families by telephone, email and mail. Accurate contact information helps ensure timely communication, prevents delays in service and supports the creation of an accurate client profile.



Note: If providing an email address, please ensure it is the parent's/guardian's email address and not the email address of a school staff member or service provider.



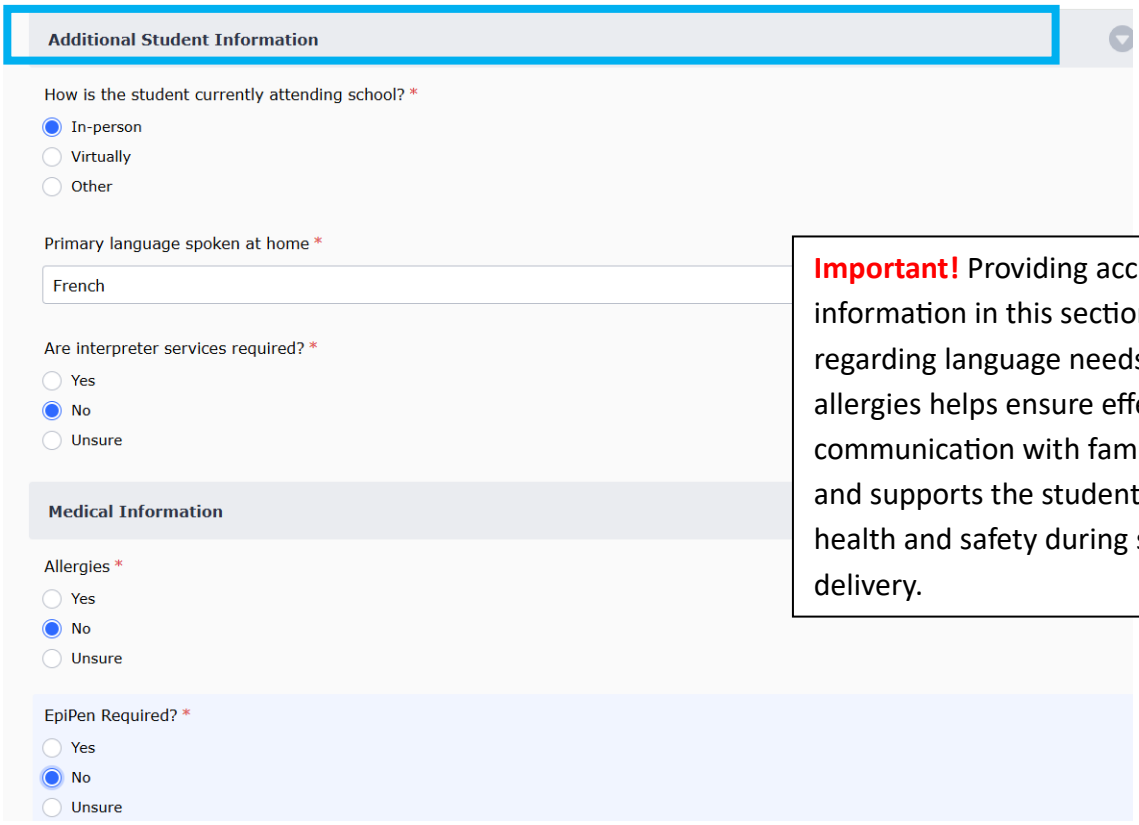
Note: When possible, provide secondary contact address information.

If the secondary contact address or contact information is not available, include a note in additional information such as: "**Secondary contact address not available in school files.**"

Section 4: Additional Student Information

Please complete the Additional Student Information section carefully to ensure ErinoakKids has the information needed to support the student's care and safety.

1. Indicate whether an interpreter is required for the student and/or family. If an interpreter is needed, specify the preferred language
2. Indicate whether the student has any allergies by selecting Yes or No. If Yes, please list all known allergies and clearly indicate whether an EpiPen is required and available for the student



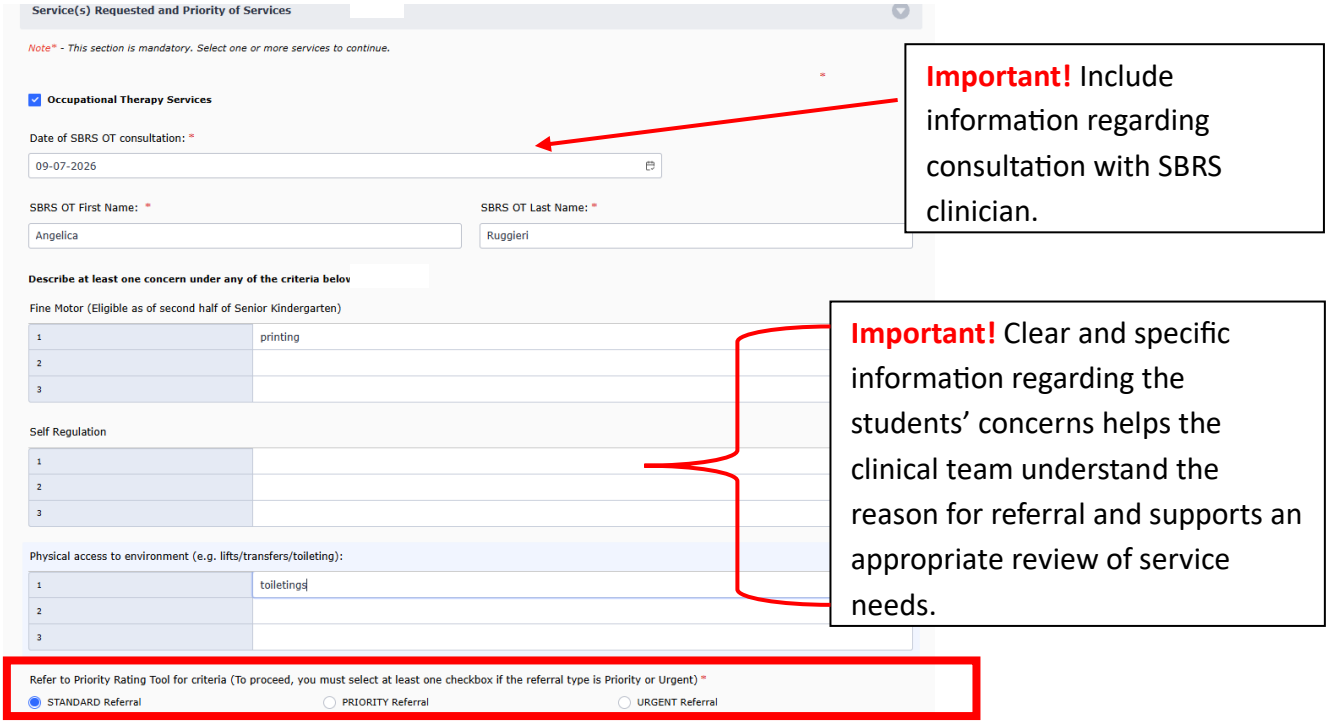
Important! Providing accurate information in this section regarding language needs and allergies helps ensure effective communication with families and supports the student's health and safety during service delivery.

Section 5: Service(s) Requested and Priority of Services

In the Service(s) Requested and Priority of Services section, please select all services being requested for the student:

- SBRS Occupational Therapy (OT)
- SBRS Physiotherapy (PT)
- SBRS Speech-Language Pathology (SLP)

When describing the students' needs, please provide **at least one** concern related to the requested service(s). It is not necessary to complete every concern box. A clear description of one primary concern is sufficient to support the referral.

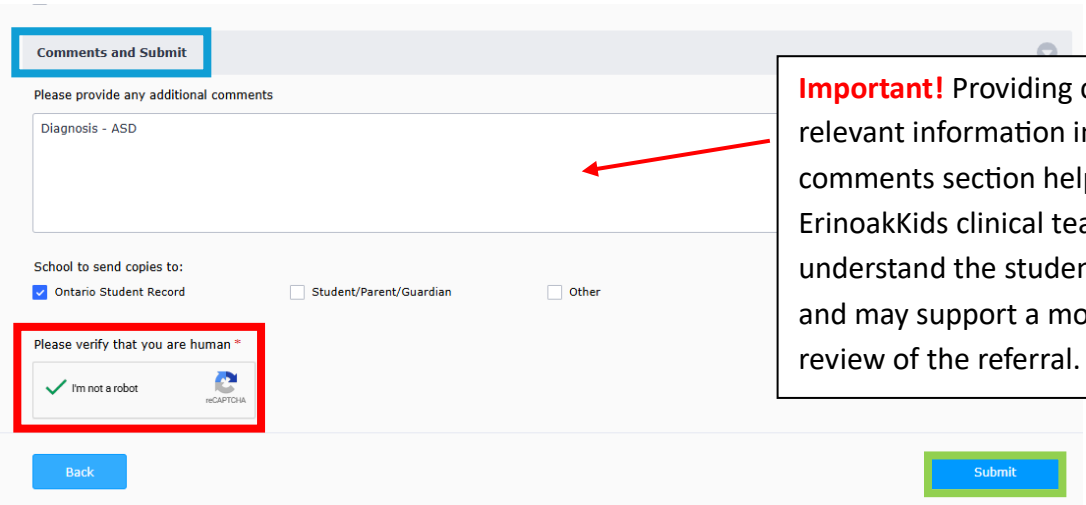


Once the concerns have been documented, select the priority rating based on the priority rating tool.

Section 6: Comments and Submit

Please include any additional information that may be helpful for clinical review and processing of the referral. Examples of information to include:

- Any known medical diagnosis or relevant health information not captured above
- A note indicating that the secondary contact or Next of Kin address is not available on the school file (if applicable)
- Relevant family/caregiver information, communication, or accessibility considerations
- Any important information/updates that were not captured in the referral



Important! Providing clear and relevant information in the comments section helps the ErinoakKids clinical team better understand the students' needs and may support a more efficient review of the referral.

SBRS Referral Submission Checklist

☐ Correct ErinoakKids SBRS Referral Form completed

☐ Parent/guardian consent obtained

☐ Student name matches school records

☐ DOB verified and entered in correct format (Day/Month/Year)

☐ Student address verified

☐ Parent email verified

☐ Parent phone number verified

☐ Requested service(s) selected & at least one concern documented

☐ Priority rating tool reviewed and correct priority rating selected

☐ Comments added if required

☐ Referral reviewed for accuracy

Need Support? Clarifying questions early can help prevent delays. Please call the ErinoakKids Intake Department to speak with an Intake Facilitator at (905) 855-2690 ext. 1.